

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER		49	11/24/00
FORMALITY REVIEW	W	6747	1-13-01
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 +/- ..... Restricted      O ..... Objected

Claim	Date
Final	
Original	
1	11/27/03
2	11/27/03
3	11/27/03
4	11/27/03
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49	11/27/03
50	11/27/03

Claim	Date
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Claim	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions  
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